

**CLOSED - This Addendum is for
reference purposes only.**

2006 VICTIMS OF CRIME ACT APPLICATION ADDENDUM (MUST BE COMPLETED IN FULL AND SUBMITTED WITH VOCA APPLICATION)

Check the appropriate box reflecting both the (A) primary use of the funds requested and the (B) purpose of the application.

(√) A	THESE VOCA FUNDS WILL PRIMARILY BE USED TO: (CHECK ONE)	(√) B	PURPOSE OF VOCA SUBGRANT APPLICATION (CHECK ONE)
	Expand services into a new geographic area		Start up a new victim services project
	Offer new types of services		Continuation of a VOCA funded project funded previously
	Serve additional victim populations		Expand or enhance an existing project not funded by VOCA in the previous year
	Continue existing services to crime victims		Start up a new Native American victim services project
	Other		Expand or enhance an existing Native American project

Victim Services Total Funding: Column 1: Please show your project's victim assistance operating budget for July 1, 2005- June 30, 2006. List actual revenues received on the appropriate line. Column 2: Please show the anticipated revenues for your agency's victim assistance operating budget for July 1, 2006- June 30, 2007. Column 3: Define the specific source. As an example: "Federal Funds" could include Family Violence and Prevention Services. "Private funds" could include United Way, private foundations, local fund raising, etc.

	ACTUAL REVENUE REC'D JULY 1, 2005 - JUNE 30, 2006	ANTICIPATED REVENUE REC'D JULY 1, 2006 - JUNE 30, 2007	REVENUE SOURCE
VOCA funds			VOCA
Federal Funds (excluding VOCA)			
State Funds			
Private Funds (specify)			
Local Funds (excluding surcharge)			
<u>Victim Surcharge Funds</u> (this is required if surcharge funds are received for any part of your organization)			
Total Project Budget			

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DESCRIPTION OF APPLICANT AGENCY (CHECK ONE)			
	Criminal Justice/Govt.		Non-Criminal Justice/Government
	Law Enforcement		Private Non-Profit Organization
	Prosecution		Native American Tribe/Org
	Court		On Reservation
	Corrections		Off Reservation

Identify the number of full-time equivalent staff who will be assigned to the proposed VOCA project. Use full-time equivalent (FTE) staff and volunteers in listing staff. The use of volunteers is a requirement of VOCA funding unless the agency has a compelling reason to request waiver of the requirement. A compelling reason may be a statutory or contractual provision concerning liability or confidentiality of counselor/victim information.

VOCA PROJECT STAFF			
	Number of PAID staff		Number of VOLUNTEER staff
	I wish to apply for a waiver of the requirement to use volunteers in programs funded by VOCA		

Programs with combined services must estimate a percentage of total VOCA caseload for each type of victim served. A combination program might indicate: "80% Domestic Violence, 10% Sexual Assault, 10% Elder Abuse". Indicate an estimated percentage of VOCA funds that will be allocated to the priority categories (Child Abuse, Domestic Abuse, Sexual Assault) and the underserved categories listed below. The combined priority and underserved categories must equal 100%.

PERCENTAGE OF TOTAL VOCA CASELOAD			
Priority Categories		Underserved Categories	
%	Child Abuse	%	DUI/DWI Crashes
%	Domestic Violence	%	Survivors of Homicide Victims
%	Sexual Assault	%	Assault
		%	Adults Molested as Children
		%	Elder Abuse
		%	Robbery
		%	Other (please specify)
	TOTAL % MUST EQUAL 100% ⇒	%	

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(√) IDENTIFY THE VICTIMS TO BE SERVED THROUGH THIS VOCA FUNDED PROJECT			
	Child Physical Abuse		Adults Molested as Children
	Child Sexual Abuse		Survivors of Homicide Victims
	DUI/DWI Crashes		Robbery
	Domestic Violence		Assault
	Adult Sexual Assault		Other Violent Crimes (please specify)
	Elder Abuse		

(√) IDENTIFY THE SERVICES TO BE PROVIDED BY THIS VOCA FUNDED PROJECT			
	Counseling		Emergency Financial Assistance
	Follow-up Contact		Emergency Legal Advocacy
	Therapy		Assistance in Filing Compensation Claims
	Group Treatment/Support		Personal Advocacy
	Crisis Hotline Counseling		Transportation
	Shelter/Safe House		Other (please specify)
	Information and Referral		
	Criminal Justice Support/Advocacy		

List the cities and counties that will be served by your program:
